

WEMMH SB/01 (12-03)  
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**DECLARATION FOR UTILITY OR  
DESIGN PATENT APPLICATION**  
(37 CFR 1.63)

☐ Declaration Submitted With Initial Filing  
☒ Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)  
OR

Attorney Docket Number	WP21745US
First Named Inventor	Manfred WATZELE
COMPLETE IF KNOWN	
Application Number	10/652,938
Filing Date	September 2, 2003
Art Unit	3637
Examiner Name	Krishnan S. Menon

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MULTICHAMBER MICRODIALYSIS DEVICE**

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) **09/2/2003** as United States Application Number or PCT International

Application Number **10/652,938** and was amended on (MM/DD/YYYY) **1/26/2004** (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
DE 20305570.5	Germany	04/07/2003		<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under U35 USC 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 23690 Place Customer Number Bar Code Label Here

OR

☐ Registered practitioner(s) name/registration number listed below.

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information Sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number Bar Code Label 23690 OR ☐ Correspondence address below

Name	Marilyn L. Amick				
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Country	US	Telephone	317-521-7561	Fax	317-521-2883

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor.

Given Name (first and middle (if any))

Family Name or Surname

Manfred

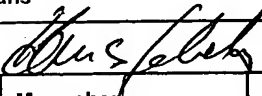
Watzelle

Inventor's Signature	<i>Manfred Watzelle</i>				Date	02/16/2006		
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Post Office Address	Ringstrasse 2							
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☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
PTO/SB/02A

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.									
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Bernd						Buchberger					
Inventor's Signature								Date			
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Post Office Address		Fendter Strasse 6									
City		Pelssenberg			State		ZIP	82380	Country	Germany	
Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.									
Given Name (first and middle [if any])						Family Name or Surname					
Hans						Schels					
Inventor's Signature								Date		02/16/06	
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Post Office Address		Behamstrasse 21									
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Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.									
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Inventor's Signature								Date			
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City		Seeshaupt			State		ZIP	82402	Country	Germany	



ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
PTO/SB/02A

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
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Inventor's Signature	Ulrike Fischer					Date	02/24/2006		
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Post Office Address	Stelgenberger Strasse 15								
City	Penzberg	State		ZIP	82377	Country	Germany		

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
Given Name (first and middle [if any])						Family Name or Surname			
Inventor's Signature						Date			
Residence	City		State		Country		Citizenship		
Post Office Address									
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City		State		ZIP		Country			

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.							
Given Name (first and middle [if any])						Family Name or Surname			
Inventor's Signature						Date			
Residence	City		State		Country		Citizenship		
Post Office Address									
Post Office Address									
City		State		ZIP		Country			